

# FINANCIAL STATEMENT

IN UNITED STATES  
THE CASE OF

MAGISTRATE  DISTRICT  APPEALS COURT  OTHER PANEL (Specify below)

Rev. 5/98

FOR Middle District  
AT Hamburg

LOCATION NUMBER

PERSONAL PROFILE: NICO (show your full name)

Anthony Alster

CHARGE/Offense (describe if applicable & check box →)  Felony  Misdemeanor

18 U.S.C. 922(g)(1)

1  Defendant Adult  
2  Defendant Juvenile  
3  Appellant  
4  Probation Violator  
5  Parole Violator  
6  Habeas Petitioner  
7  2255 Petitioner  
8  Material Witness  
9  Other (Specify)

DOCKET NUMBERS  
Maryland  
District Court  
1-CR-0132  
Court of Appeals

## ANSWERS TO QUESTIONS REGARDING ABILITY TO PAY

EMPLOYMENT	Are you now employed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No I Am Self Employed				
	Name and address of employer: _____				
	IF YES, how much do you earn per month? \$ _____	IF NO, give month and year of last employment How much did you earn per month? \$ <u>12/2004, 1700.00</u>			
	If married is your Spouse employed? <input type="checkbox"/> Yes <input type="checkbox"/> No _____	IF YES, how much does your Spouse earn per month? \$ _____			
If a minor under age 21, what is your Parents or Guardian's approximate monthly income? \$ _____					
ASSETS	Have you received within the past 12 months any income from a business, profession or other form of self-employment, or in the form of rent payments, interest, dividends, retirement or annuity payments, or other sources? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	RECEIVED	SOURCES			
	IF YES, GIVE THE AMOUNT RECEIVED & IDENTIFY \$ _____ THE SOURCES _____	_____			
CASH	Have you any cash on hand or money in savings or checking account <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No IF YES, state total amount \$ _____				
PROPERTY	Do you own any real estate, stocks, bonds, notes, automobiles, or other valuable property (excluding ordinary household furnishings and clothing)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
	VALUE	DESCRIPTION			
	IF YES, GIVE THE VALUE AND \$ _____ DESCRIBE IT _____ _____	_____			
OBLIGATIONS & DEBTS	MARITAL STATUS				
	<input checked="" type="checkbox"/> SINGLE	Total No. of Dependents			
	<input type="checkbox"/> MARRIED <input type="checkbox"/> WIDOWED <input type="checkbox"/> SEPARATED OR DIVORCED	1. List persons you actually support and your relationship to them <u>Gwinnette T. Sodale - Son</u>			
DEBTS & MONTHLY BILLS	APARTMENT OR HOME:	FILED HARRISBURG PA			
(LIST ALL CREDITORS, INCLUDING BANKS, LOAN COMPANIES, CHARGE ACCOUNTS, ETC.)		OCT 4 - 2005	Creditors	Total Debt	Monthly Payt.
MARY E. D'ANNAHAN - LEAK Per _____			\$ _____	\$ _____	\$ _____
Deputy Clerk _____			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____
			\$ _____	\$ _____	\$ _____

I certify under penalty of perjury that the foregoing is true and correct. Executed on (date) \_\_\_\_\_

104 yes

**SIGNATURE OF DEFENDANT  
(OR PERSON REPRESENTED)**